

What does Mental Health offer inside the Indiana Department of Correction?

The Indiana Department of Correction (IDOC) Mental Health Division, acting under the authority of the Chief Medical Officer, offers a continuum of clinical mental health services provided by our contracted mental health services provider that include intake, evaluation, treatment planning, routine interventions, crisis management, and discharge planning to all offenders. Our mission is to provide access for all offenders with mental health needs to comprehensive mental health services. Offenders with identified mental health needs are seen routinely for mental health monitoring, individual sessions, group therapy, or combination of all three. Routine psychiatric interventions are also available and include evaluation and medication management.

Offenders may request mental health services at any time at no charge whether they are on the mental health roster or not. Services are provided in the least restrictive setting in which the offender's mental health symptoms may be managed. The vast majority receive care in a general population setting in the form of outpatient psychotherapy, psychiatric medication management, and mental status monitoring.

What is the typical procedure for incoming inmates, specifically regarding an assessment of their mental health needs and plans for care?

Our intake unit for male offenders is the Reception Diagnostic Center while our female's complete intake at Rockville Correctional Facility. All offenders will be screened by a mental health trained nurse for mental health history, suicidal ideation, and behavior, if the offender is on psychotropic medications, substance abuse history, prior suicide attempts or self-injurious behavior, and drug withdrawal symptoms.

If the nurse's assessment identifies emergency mental health needs, the offender is immediately evaluated by a Mental Health Professional (MHP). Offenders who are potentially suicidal must be placed under direct visual observation by a staff member until an evaluation by an MHP has been completed.

If an offender is identified as having a need for more urgent, but not emergent, mental health evaluation, he will receive a comprehensive evaluation by an MHP within seven days of the referral. For offenders who do not have emergent or urgent mental health needs, an MHP will perform a structured interview that not only explores the offender's mental health history but several other topics that may affect the offender's mental health and placement within the Indiana Department of Correction (IDOC). This interview occurs within 14 days of arrival for all offenders. The MHP determines what type of mental health services the offender will need. An offender can ask for mental health services at any time during their incarceration and they will be seen within 7 days of that request.

Do you have any statistics regarding the number of inmates who receive some form of mental health care while incarcerated and what that care comprises?

To make sure offenders are placed at a facility where their needs can be met, we have an extensive offender classification system. One of the factors included in an offender's classification is the identified level of need for mental health services. Here is a breakdown of the offenders we are housing by mental health code:

CLMHLVL	Number	Percent
A	19493	76.84
B	422	1.66
C	3731	14.71
D	1374	5.42
E	238	0.94
F	110	0.43

The vast majority of the offenders housed in the Indiana Department of Correction are free of mental illness (A). Most offenders with B, C, and D mental health codes live in general population or some type of modified general population environment. Offenders with E or F mental health codes live in one of our mental health treatment units and have the most functional impairment and the greatest need for mental health services.

A continuum of mental health services is offered at most facilities; if an offender is at a facility that cannot accommodate his/her needs, he/she will be transferred to one that can.

Does a receiving institution know the background of incoming inmates in terms of the verdict under which they have been convicted?

Yes, receiving facilities have access to all incoming offenders' background information.

Who is housed in the mental health unit? How are those inmates identified, and how is their experience different and/or specialized in comparison to the general population?

Offenders in need of stabilization, who have an increased need for mental health treatment, or who are suffering from functional impairment as a result of mental illness make up much of our mental health treatment unit population. We have three mental health treatment units for males—New Castle Psychiatric Unit at New Castle Correctional Facility; the Special Needs Unit at Wabash Valley Correctional Facility; and the Pendleton INSIGHT Treatment Unit at Pendleton Correctional Facility, and one mental health treatment unit for females at Indiana Women's Prison.

Offenders are identified for placement in the mental health treatment units based on observed and reported behaviors indicative of functional impairment or a need for stabilization. If treatment in general population or restrictive housing is not sufficient to stabilize the offender's mental health, then he/she may be referred for placement in a mental health treatment unit.

Offenders living in the mental health treatment units are offered therapeutic programming and individual treatment. Peer mentors, or offenders who have gone through special programming to

provide support, companionship, feedback about antisocial behaviors and role model prosocial behaviors to offenders in the treatment units, are also utilized.

What are SNAP Units?

For some individuals with mental illnesses, general population is not the best setting because they may be vulnerable, may be sensitive to high levels of stimulation, or they may require a more structured environment. In response to this need, several facilities have developed the **Special Needs Acclimation Program (SNAP)** units. These units serve as a supportive living environment for offenders with physical or mental health needs and are staffed with custody, unit team and clinical staff who are aware of those needs and can provide close monitoring and support.